United States District Court

for the

Southern District of Florida

PAULA J. PHILLIPS, individually and on behalf of all others similarly situated,)))
Plaintiff(s)) Civil Action No. 1:25cv21074
STRAIGHT SMILE LLC d/b/a BYTE and DENTSPLY SIRONA INC.)))
Defendant(s))

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) DENTSPLY SIRONA INC.
UNITED AGENT GROUP INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33407

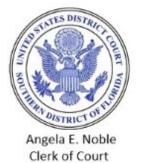
A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Stuart Z. Grossman, Grossman Roth Yaffa Cohen, PA

2525 Ponce de Leon, Suite 1150 Coral Gables, FL 33134 Telephone: (888) 296-1681 Facsimile: (305) 285-1668 Email: szg@grossmanroth.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: Mar 10, 2025



SUMMONS

s/ C. A. Weech

Deputy Clerk U.S. District Courts Civil Action No. 1:25cv21074

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

was ra	This summons for (no ceived by me on (date)	ame of individual and title, if an	ny)			
was ice	cerved by the on (aute)		·			
	☐ I personally served the summons on the individual at (place)					
			on (date)	; or		
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
		, a person of suitable age and discretion who resides there,				
	on (date), and mailed a copy to the individual's last known address; or					
	☐ I served the summons on (name of individual) designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the sum	nmons unexecuted because	e	; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty of perjury that this information is true.					
Date:		_	Server's signature			
		_	Printed name and title			
		_	Server's address			

Additional information regarding attempted service, etc:

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